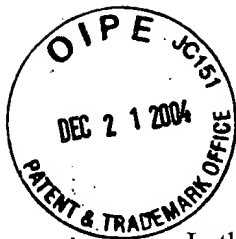


12/22/04

3626/1
Ch

(MHM 16274US01)



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

CERTIFICATE OF MAILING

In the Application of:

Rebecca S. Busch

Serial No.: 09/713,619

Filed: 11/15/2000

For: A SYSTEM AND A METHOD FOR AN
AUDIT AND VIRTUAL CASE
MANAGEMENT OF A BUSINESS
AND/OR ITS COMPONENTS

Examiner: Vivek D. Koppikar

Group Art Unit: 3626

EXPRESS MAIL NO.: EL 164037275 US

I hereby certify that this correspondence is
being deposited with the United States Postal
Service as Express Mail in an envelope
addressed to: Mail Stop Amendment,
Commissioner for Patents, P.O. Box 1450,
Alexandria, VA 22313-1450 on
December 21, 2004.

By:

David Z. Petty
David Z. Petty
Reg. No. 52,119

AMENDMENT UNDER 37 C.F.R. §1.111

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

The present Amendment responds to the Office Action mailed September 23, 2004. Please
amend the application in this case as follows:

12/27/2004 WABDELRI 00000015 09713619 350.00 OP
01 FC:2202

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.

Fees subject to the consolidated Appropriates Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

DEC 21 2004

for FY 2005

Complete if Known

Application Number 09/713,619

Filing Date 11-15-2000

First Named Inventor Rebecca S. Bush

Examiner Name Vivek D. Koppikar

Art Unit 3626

Attorney Docket No. 16274US01

☒ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 350.00**METHOD OF PAYMENT** (check all that apply)☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☐ Deposit Account Deposit Account Number: 13-0017 Deposit Account Name: McAndrews Held & Malloy

For the above-identified deposit account, the Director is hereby authorized to (check all that apply)

☐ Charge Fee(s) indicated below☐ Charge Fee(s) indicated below, **except for the filing fee**☒ Charge any additional fee(s) or underpayments of fees(s) ☐ Credit any overpayments
under 37 CFR 1.16 and 1.17**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid(\$) |
|------------------|-------------|----------------------|-------------|----------------------|------------------|----------------------|---------------|
| | Fee (\$) | Small Entity Fee(\$) | Fee(\$) | Small Entity Fee(\$) | Fee(\$) | Small Entity Fee(\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES**Fee Description**

| | Fee(\$) | Small Entity Fee(\$) |
|---|---------|----------------------|
| Each claim over 20, or for Reissues, each claim over 20 and more than in the original patent | 50 | 25 |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent | 200 | 100 |
| Multiple dependent claims | 360 | 180 |

| Total Claims | Extra Claims | Fee(\$) | Fee Paid (\$) | Multiple Dependent Claims |
|--------------|--------------|---------|---------------|---------------------------|
| 34 | -20 or HP 14 | x 25.00 | = 350.00 | Fee: Fee Paid (\$) |

HP = highest number of total claims paid for, if greater than 20

| Indep. Claims | Extra Claims | Fee(\$) | Fee Paid (\$) |
|---------------|--------------|---------|---------------|
|---------------|--------------|---------|---------------|

-3 or HP

x

=

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee(\$) | Fee Paid(\$) |
|--------------|--------------|--|---------|--------------|
| -100 | /50 | (round up to a whole number) | x | = |

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: _____

SUBMITTED BY

| | | | | | |
|-------------------|----------------|-----------------------------------|--------|-----------|-------------------|
| Signature | David Z. Petty | Registration No. (Attorney/Agent) | 52,119 | Telephone | (312)775-8090 |
| Name (print/type) | David Z. Petty | | | Date | December 21, 2004 |